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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

3.S. PATENT APPLICATION SERIAL NO	Unknown
ILING DATE	
INVENTOR	James P. Kuntz
ASSIGNEE	Spokane Industries, Inc.
GROUP ART UNIT	
EXAMINER	Unknown
ATTORNEY'S DOCKET NO	46982.0004
TITLE	

## TRANSMITTAL LETTER AND CERTIFICATE OF MAILING

To: Mail Stop Patent Application

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

From: L. Grant Foster

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Enclosed are the items listed below submitted regarding the matter identified above:

- Transmittal Letter with Certificate of Express Mailing included 1.
- PTO Return Postcard Receipt 2.
- Patent Application (24 Pages, including Specification, 30 Claims, Abstract, and 3. 8 Sheets of Drawings (Figs. 1-9))
- Declaration of Sole Inventor for Patent Application (unsigned) 4.
- Statement Concerning Small Entity 5.
- Fee Calculation Sheet 6.
- 7. Check for \$561.00 (\$385.00 Basic Filing Fee, \$176.00 Extra Claims Fee)

Deposit Account Authorization - The Commissioner is hereby authorized to charge payment of any applicable fees to Deposit Account No 108-2623.

Date: 21 OCTOBER 2003

## CERTIFICATE OF MAILING

I hereby certify the items listed above as enclosed are being deposited with the U.S. Postal Service as either first class mail or Express Mail, if the blank for Express Mail No. is completed below, in an envelope addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the below indicated date.

Express Mail No. EV 357960414 US

Date:	21 October 2003	Signature:		Kuthu Cuse	
		•	Name:	Kathy Case	

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FEE TYPES								
BASIC FEE (	\$770/385)				··········		\$ 385.00	
CLAIMS FEES	Claims Remaining After Any Al	Minus the Larger  Number Number of		Equals  Excess Claims For Which Fees Are Now Due	Times Rate (\$)			
		Allowed in Base Fee	Large Entity		Small Entity			
Total Claims	30	20		10	18.00	9.00	90.00	
Indep. Claims	5	3		2	86.00	43.00	86.00	
Appl for response un	PETITION/FEE icant hereby petition ider 37 CFR 1.136 aintain the penden FEES	ons for an exten (a) as indicated	or as	One month Two months Three months Four months Five months	110.00 420.00 950.00 1,480.00 2,010.00	55.00 210.00 475.00 740.00 1,005.00		
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**Deposit Account Authorization** - The Commissioner is hereby authorized to charge any necessary payments or credit any applicable fees to Deposit Account No. 08-2623.

A check for the \$561.00 filing fee is enclosed.

Date: 21 OCTOBER 2003

. Grant Foster

Registration No. 33,236